SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to fou. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. (Extra charge)			
3. Article Addressed to:	4. Article Number		
	0 559 863 MM		
PPG Packaging, Inc.	Type of Service:		
10200 Springfield Pike	Registered Insured		
Cincinnati, OH 45215	Certified COD		
Cincinnati, un 43213	Return Receipt		
	Express Mail for Merchandise		
	Always obtain signature of addressee		
	or agent and DATE DELIVERED.		
5. Signature — Address	8. Addressee's Address (ONLY if		
x Kim Shaver	requested and fee paid)		
6. Signature - Agent			
x 120	US EPA RECORDS CENTER REGION 5		
7. Date of Delivery			
11(0			
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-000			

P 559 863 000

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

PPG Packaging, Inc. 10200 Springfield Pike Cincinnati, OH 45215

.u.t	Postage .	5,65
	Certified Fee	³,65 ,85
	Special Delivery Fee	
٠.	Restricted Delivery Fee	` •
	Return Receipt showing to whom and Date Delivered	ر رج ر
PS Form 3800, June 1985	Return Receipt spowing to whom Date, and Address of Delivery	
Jun.	TOTAL Postage and F	10
3800	Postmark or Date	1
E O	250 H3	
PS		